IPW#

PTO/SB/21 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031

| Under the Decorrost Reduction Act of 1005 | U.S | 6. Patent and T | rademark Office; U.S. DEPARTMENT OF COMMERCE | | | | | | | |
|--|---|-----------------|--|--|--|--|--|--|--|--|
| Under the Paberwork Reduction Act of 1995. | Application Number | 10/748,30 | formation unless it displays a valid OMB control number. | | | | | | | |
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| TRANSMITTAL | Filing Date | December | 31, 2003 | | | | | | | |
| 👸 FORM | First Named Inventor | Drury | | | | | | | | |
| 1,350 | Art Unit | 1771 | | | | | | | | |
| the harvest for all assessment and offer initial file | Examiner Name | Chang | | | | | | | | |
| (to be used for all correspondence after initial file | Attorney Docket Numbe | X-9449 | | | | | | | | |
| Total Number of Pages in This Submission | | 7.5440 | | | | | | | | |
| ENCLOSURES (Check all that apply) | | | | | | | | | | |
| Fee Transmittal Form Fee Attached | Drawing(s) Licensing-related Papers | | After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences | | | | | | | |
| Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request | Petition Petition to Convert to a Provisional Application Power of Attorney, Revoca Change of Correspondence Terminal Disclaimer Request for Refund | | Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): | | | | | | | |
| Express Abandonment Request Information Disclosure Statement Certified Copy of Priority | CD, Number of CD(s) Landscape Table on Remarks | CD | | | | | | | | |
| Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 | | | | | | | | | | |
| SIGNAT | TURE OF APPLICANT, ATT | ORNEY, C | OR AGENT | | | | | | | |
| Firm Name Gipple & Hale Signature | | | | | | | | | | |
| Printed name John\S. Hale | | | | | | | | | | |
| Date January 25, 2006 | | Reg. No. | 25,209 | | | | | | | |
| I hereby certify that this correspondence is be sufficient postage as first class mail in an env | ERTIFICATE OF TRANSMIS eing facsimile transmitted to the US relope addressed to: Commissioner | PTO or depos | ILING sited with the United States Postal Service with P.O. Box 1450, Alexandria, VA 22313-1450 on | | | | | | | |
| the date shown below: Signature | | | | | | | | | | |
| | | | Date | | | | | | | |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032

| Under the Paperwork Re | duction Act | no persons are requ | uired to re | U.S. Patent espond to a collection | and Trade | mark Office; Lation unless it | J.S. DEPA displays a | RTMENT OF COMMERCE valid OMB control number | | |
|---|-----------------------|-----------------------------|-------------------------------|------------------------------------|-------------|-------------------------------|-------------------------|---|--|--|
| PRADEM | | | | Complete if Known | | | | | | |
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2006 | | | Application Number 10/748 | | | ,302 | | | | |
| | | | Filing Date December 31, 2003 | | | <u> </u> | | | | |
| | | | First Named Inv | Named Inventor Drury | | | | | | |
| | | | Examiner Name | | Chang | | | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | Art Unit | | 1771 | | | | | |
| TOTAL AMOUNT OF I | PAYMENT (\$ | 510.00 | | Attorney Docket | | (-9449 | | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | | |
| ✓ Check Credit Card Money Order None Other (please identify): | | | | | | | | | | |
| Deposit Accoun | t Deposit Accour | nt Number: | | Deposit Ac | count Nan | ne: | | | | |
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| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below except for the filing fee | | | | | | | | | | |
| · | | | | | | | | | | |
| under 37 | CFR 1.16 and 1 | .17 | | U O O O O O | • | payments | | | | |
| WARNING: Information of information and authorization | | | t card inf | formation should no | ot be inclu | ided on this f | orm. Prov | ide credit card | | |
| FEE CALCULATION | | | upon fi | ling or may be | subject | to a surch | arge.) | | | |
| 1. BASIC FILING, S | | | | | | | | | | |
| i. DAGIO I ILINO, O | FILING | FEES | | RCH FEES | EXAM | NATION F | | | | |
| Application Type | Fee (\$) | Smail Entity Fee (\$) | Fee (\$ | Small Entity Fee (\$) | Fee (| Small En 5) Fee (\$ | | Fees Paid (\$) | | |
| Utility | 300 | 150 | 500 | 2 <u>ree (s)</u> 250 | 200 | 27 <u>- 69 (\$</u> 100 | , | <u> </u> | | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | | | | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | | <u> </u> | | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | | | | |
| 2. EXCESS CLAIM | | 100 | U | U | U | U | S | mall Entity | | |
| Fee Description | FEES | | | | | <u>Fee</u> | | Fee (\$) | | |
| Each claim over 2 | , – | , | | | | 50 | - | 25 | | |
| Each independent claim over 3 (including Reissues) | | | | | 20 36 | | 100 180 | | | |
| Multiple dependent claims Total Claims Extra Claims Fee (\$) Fee Paid (\$) | | | | | | - | endent Claims | | | |
| Total Claims Extra Claims Fee (\$) Fee Paid (\$) - 20 or HP = x = = | | | | | | Fee | | Fee Paid (\$) | | |
| HP = highest number of | f total claims paid f | or, if greater than 20. | | | | | | | | |
| Indep. Claims - 3 or HP | Extra Clair | | <u>Fee</u> | Paid (\$) | | | | | | |
| HP = highest number of | | Xs paid for, if greater the | . = nan 3. | | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 | | | | | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets | | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$) | | | | | | | | | | |
| Other (e.g., late filing surcharge): Extension Fee 510.00 | | | | | | | | | | |
| SUBMITTED BY | 7 | | | | | | | | | |
| Signature | | <i>,</i> | | Registration No. 2 | 5 209 | Те | lephone · | 703-448-1770 | | |

SUBMITTED BY

Signature

Registration No. (Attorney/Agent) 25,209

Telephone 703-448-1770

Date January 25, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.